



TOWN OF HOPEDALE

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

PLEASE PRINT

Position Applied For		Date of Application	
How Did You Learn About Us?			
<input type="checkbox"/> Advertisement		<input type="checkbox"/> Friend	
<input type="checkbox"/> Employment Agency		<input type="checkbox"/> Walk-In	
<input type="checkbox"/> Relative		<input type="checkbox"/> Other	
Last Name		First Name	Middle Name
Street Address		City	State
			Zip Code
Telephone		Social Security Number	

If you are under 18 years of age, can you provide required proof of your eligibility to work?

☐ Yes ☐ No

Have you ever filed an application with us before?

☐ Yes ☐ No

If Yes, give date _____

Have you ever been employed with us before?

☐ Yes ☐ No

If Yes, give date _____

Are you currently employed?

☐ Yes ☐ No

May we contact your present employer?

☐ Yes ☐ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

☐ Yes ☐ No

Proof of citizenship or immigration status will be required upon employment

On what date would you be available for work?

Are you available to work: ☐ Full Time ☐ Part Time ☐ Shift Work ☐ Temporary

Are you currently on "lay-off" status and subject to recall?

☐ Yes ☐ No

Can you travel if a job required it?

☐ Yes ☐ No

Have you been convicted of a felony within the last 7 years?

☐ Yes ☐ No

Conviction will not necessarily disqualify an applicant from employment

If Yes, please explain _____

The Town of Hopedale is an Equal Opportunity Employer

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap, or other protected status.

1.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

2.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

3.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

4.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Education

	Elementary School					High School				Undergraduate College/University				Graduate/ Professional			
School Name and Location																	
Years Completed	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree																	
Describe Course of Study																	
Describe any specialized training, apprenticeship, skills and extra-curricular activities																	
Describe any honors you have received																	
State any additional information you feel may be helpful to us in considering your application																	

Indicate any foreign languages you can speak, read and/or write			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

List professional, trade, business or civic activities and offices held.
You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:

REFERENCES

Give name, address and telephone number of three references who are not related to you and are not previous employers.

1. _____
2. _____
3. _____

Have you ever had any job-related training in the United States Military? ☐ Yes ☐ No

If yes, please describe _____

ADDENDUM TO EMPLOYEE APPLICATION

I certify that, to the best of my information, knowledge and belief, the information provided in this application is true, complete and accurate, and I understand that a thorough background investigation may be conducted with respect to my credit status, character, general reputation and personal characteristics. If any information provided by me is false or misleading, or if I have omitted information which makes my response false or misleading, I understand that this will result in refusal or termination of employment by the Town of Hopedale whenever discovered. If employment is refused as a result of said background investigation, I may exercise my legal rights in writing to review same.

I authorize my personal references, my former employers, and all persons or entities to furnish to the Town of Hopedale any information they may have regarding me which they have on record or otherwise. I hereby release the Town of Hopedale, my personal references, my former employers and all individuals concerned in any such background investigation from all liability for any damage whatsoever for furnishing such information.

If employed by the Town of Hopedale, I understand that subject to security policies of the Town of Hopedale, I agree to abide by all Town policies, procedures and practices. The Town of Hopedale reserves the right to unilaterally modify, amend or change its policies, procedures and practices at any time.

I understand that if employed, I may be terminated by the Town of Hopedale at any time for any reason, with or without cause, and that I may terminate my employment with the Town of Hopedale at any time for any reason, with or without cause, and that such employment will occur at will, and no contract of employment, expressed or implied, is or will be created.

I have read and understand the above statements.

Signed: _____ Date: _____